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## **OLR Bill Analysis**

### **SB 858**

#### ***AN ACT CONCERNING HEALTH INSURANCE COVERAGE FOR TELEMEDICINE SERVICES.***

##### **SUMMARY:**

This bill requires certain health insurance policies to cover medical services provided through telemedicine to the same extent that coverage is provided for the services through in-person visits between an insured person and a health care provider. The coverage is subject to the same terms and conditions that apply to other benefits under the policy (e.g., copay requirements).

EFFECTIVE DATE: January 1, 2014

#### **COVERGE OF TELEMEDICINE SERVICES**

##### ***Definition***

The bill defines “telemedicine” as the use of interactive audio, video, or data communication when delivering medical advice, diagnosis, care, or treatment. This includes diagnostic or treatment services, such as primary diagnosis of pathology specimens, slides, or images. “Telemedicine” does not include the use of fax or audio-only telephone.

##### ***Applicability***

The bill applies to individual and group health insurance policies delivered, issued, renewed, amended, or continued in Connecticut that cover (1) basic hospital expenses; (2) basic medical-surgical expenses; (3) major medical expenses; or (4) hospital or medical services, including coverage under an HMO plan.

Due to the federal Employee Retirement Income Security Act (ERISA), state insurance benefit mandates do not apply to self-insured benefit plans.

**COMMITTEE ACTION**

Insurance and Real Estate Committee

Joint Favorable

Yea 12 Nay 7 (02/26/2013)